

Title: Revenue Strategies

Session: **W-2-0800**



Objectives

- Help You Realize Your Reimbursement Potential
- Give You a Tool to Assess Your Program

Overview



- Key Performance Indicators Metrics
 - Are They Accurate? Why or Why Not
 - How Can KPIs Help You Improve
- Assessing Your Program
 - Historical Reality
 - The Data Is What the Data Is
 - Market Share
 - Enrolled vs. User Population
 - Strengths and Weaknesses
 - Perceived and Actual
 - Variables
 - Which ones can you control?
 - Process Improvement Opportunities



Key Performance Indicators - METRICS

- Reporting Levels
 - TMA Level Metrics
 - DD 2570 Quarterly Requirement
 - DD 2569 Audit Requirement
 - Service Level Metrics
 - Intermediate Command/MAJCOM Level Metrics
 - MTF Level Metrics
- Accuracy
 - Self-Reported Data
 - Centrally Pulled Data
- Relevance Depends on Your Point of View
 - Does it help to improve the program?
 - Is it for historical information only?

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Assessing Your Program

- Analysis
 - Population
 - Location
 - Historical Reality
 - Outside Forces
- Making Changes
 - Ideas You Can Use
- Tracking Your Progress
 - KPIs
 - Are Satisfied With Where You Are?
 - The Next Step



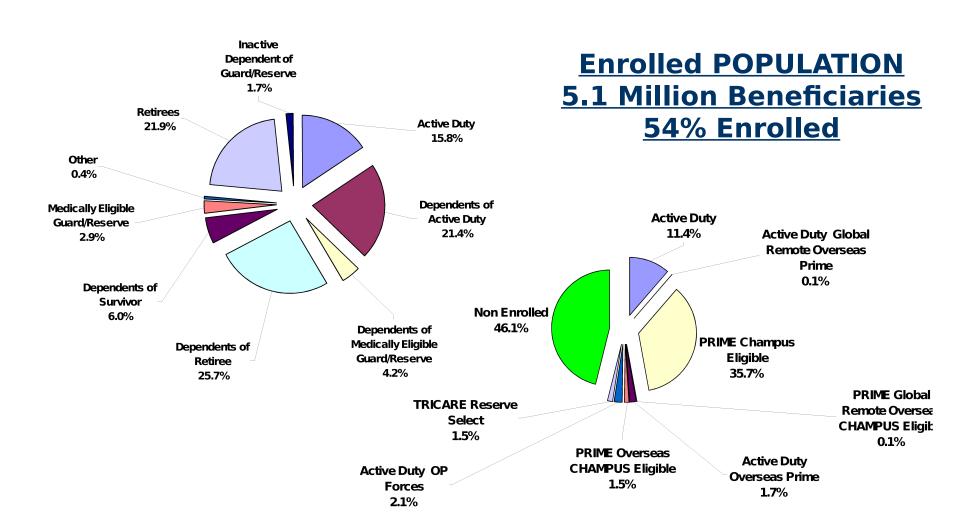
Population



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Population

PRISM POPULATION 9.6 Million Beneficiaries





Find YOUR Target Population

TRICARE OPERATIONS CENTER

TRICARE Relationships Reports

http://mytoc.tma.osd.mil/Enroll/toc/EnrollmentRepor t.htm



Where Is Your Base Located?

Does It Make A Difference?





Local Economy - Does It Matter?

- What is your unemployment rate?
 - If your beneficiary population can't get a job, the chances they have health insurance is low
 - http://www.bls.gov/web/laumstrk.htm
- What is the uninsured rate in your area?
 - Why?
- Who are your main employers?
 - Do they offer health insurance?
- What is your payer mix?
 - Policy types Is your area a heavy HMO area?
- Is your location an area that draws retirees?
 - How do you know?



Outside Forces - Cause/Effect

- When did the last recession start? End?
 - When did or will you feel the effect?
- What is the life cycle of an insurance policy?
 - When is an employee eligible to get insurance?
 - What is the cost to the employee (potential OHI)?
 - If the employee loses their job?
 - When does the insurance lapse?
 - What about COBRA plans?
 - Open Season
 - Individual insurance company fiscal years
- Patients speculate about changes to TRICARE benefits

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Your MTF Just the Facts

- What services do you have?
 - Outpatient
 - Inpatient
 - Surgery capability
- How easy is it to get an appointment at your MTF?
 - Do you have to be enrolled to get an appointment?
- What is the breakdown of your eligible population?
 - http://mytoc.tma.osd.mil/Enroll/toc/EnrollmentReport.htm
- What is your user population?
 - Which patients only use your pharmacy?
- How have you done historically?
 - What factors do you know will change in the next FY?
- Do you have a marketing plan?
 - Who are you marketing to?



Measuring Your Potential

- How do you KNOW if you are meeting your revenue potential?
- What are the variables you have to work with to improve your program?
 - MTF Service Capability
 - MTF Personality
 - Population
 - Insurance Companies
 - Types of Plans
 - Economic Realities
- Are you making a profit?
 - Cost to run your program vs. collections

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Return on Investment - ROI

- What is it costing you to run your program?
 - Labor Expenses FTEs
 - Supply Expenses forms, pens, paper, etc.
 - Overhead Expenses Your portion
 - Other Expenses Marketing materials, etc.
- How much revenue is your program bringing in?
 - Inpatient/outpatient gross revenue
- How does your equation look?
 - Are expenses less than revenue?
- What can you do to reduce expenses and increase revenue?
- Who do you compare yourself to?

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Pick Peers Carefully

MTF A

- Southeast
- Services: BAL, BCB, BDA, BFD, BFE, BFF, BGA, BHC, BJA, BLA
 - Social Work, Psychiatry
- NAD Visits 22,197
- # of Claims 7,627
- Collections \$684K
- Population 9,745
 - DA: 3,784
 - DR: 1,545
 - RET: 836

MTF B

- Southeast
- Services: BAL, BCB,
 BDA, BEA, BFD, BGA,
 BHC, BJA, BLA
 - Orthopedics
- NAD Visits 41,008
- # of Claims 39,506
- Collections \$3.2M
- Population 16,454
 - DA: 3,576
 - DR: 5,482
 - RET: 3,960



How Do You Figure It Out?

- What do you measure?
- How often do you measure?
 - Monthly, quarterly, annually
- Why are you measuring it?
 - Is it a requirement?
- Do you find what you measure important?
 - Does it add value to your program?
- What do you do with the results?
 - What could you do with the results?
- Who do you compare yourself to?
 - Who is comparing themselves to you?

WEENER COLLEGE BOUCH COLLEGE B

Things You Cannot Control

- Patient's Right to Choose their Coverage
 - Covered/Non-covered services determined by coverage purchased
 - Amounts of co-pay/deductibles vary by policy
 - Greater than 30 day Rx scripts
 - Some companies pay only 30 days
 - Some pay a percentage based on days dispensed
 - Some companies will not pay
 - Some companies pay in full (minus co-pay/deductible)
- Additional Policies Secondary insurance
 - Medicare Prime patients (65+ and others)
 - Supplemental insurance policy plan provisions
 - Indemnity plans Pay patient, not facility
- Code of Federal Register (CFR) issues
 - Example: HMOs do not pay except for emergent care on a limited basis
- Over-the-counter (OTCs) line items are not billed
 - Note: OTCs are dispensed at MTF pharmacy locations
- Rate table methodology varies each fiscal year
- Changes to governmental health care requirements



Things You Can Control - Data Quality

Look at the data quality issues that affect billing

- Patient files
 - Patient category
 - OHI information
 - Duplicate patients
- Provider files
 - Naming conventions duplicates?
 - NPIs
 - Provider Specialty/HIPAA Taxonomy Codes
- Pharmacy
 - NDC numbers Are they current?
 - Package size/multiples Are they set up right?
- MSA functions
 - Notify roster
- Accounts Receivable
- Are all of your clinics set up to feed ETUs?



Bring the Pieces Together

- Non Active Duty population number for your MTF
 - On average, how many times is a patient seen in your MTF?
- How many DD 2569s did you collect last year?
 - Who has a great process?
 - Who needs to improve their process?
 - What can you do to ensure you are getting a form for every non-active duty 'user' of your MTF?
- Of the DD 2569s collected, how many had OHI?
 - Of the OHI, how many were billable OHI?
 - What do you to with the NO OHI Forms besides file them?
 - What electronic OHI solutions are you using?
- Does an increase in DD 2569 forms collection impact your program?



Bring the Pieces Together

- Which product lines in your MTF are HIGH dollar?
 - What are you doing to ensure you are capturing all of the billable events from that area(s)?
- Medical Coding
 - How accurate is the coding at your MTF?
 - What procedures are in place to improve coding?
 - Are you auditing your claims for coding accuracy prior to billing?
- Managing your Accounts Receivable
 - How often do you follow up on a claim?
 - What is the criteria for you to send the claim to Legal?
 - Develop an aggressive Denials Management Program
 - Allowance for doubtful accounts
 - Being realistic What can you really expect to collect?



Keeping the Pieces Together

- Research new rate packages to avoid revenue fluctuation surprises
- Be aware of coding changes that are coming in the future – i.e., ICD-10
- When you submit a Help Desk Ticket, stay on top of the MHS Help Desk until your issue is resolved
- Look for opportunities to reduce manual processing
- Monitor Accounts Receivable
 - Run your AR by insurance company
 - Look for trends with insurance companies
 - Aged Days
 - Payer Edits



Process Improvement Ideas

- Isolate the data quality issues facing your MTF
 - Identify two or more factors to work on that would make the greatest impact on revenue at your site
- Monitor DD 2569 collection OHI discovery closely
 - Consider mail-out program
 - Consider electronic OHI discovery
- Increase electronic processing
 - Billing
 - EOB remittance
 - EFT direct deposit from insurance company
- Market the TPC program to your beneficiaries
 - Retiree days, base paper, pamphlets



